FORM S1

SID | M | 8 | 4 | 0 | 5 | |

IN CONFIDENCE

1. SURVEY 4 6
   PSU
   BLOCK
   DWELLING
   HOUSEHOLD
   PERSON

AUSTRALIAN BUREAU OF STATISTICS

POPULATION SURVEY

MAY 1984

2. SEX
   Male 1
   Female 2

3. AGE
   YEARS

4. MARITAL STATUS
   Married 1
   Separated 2
   Divorced 3
   Widowed 4
   Never married 5

5. S.D. ONLY
   S.D. Institutionalised person (*No more questions*) .. 1
   S.D. Boarding school pupil (*No more questions*) .. 2
   S.D. Other 3

6. COUNTRY OF BIRTH
   Australia (*Go to Q.8*) 01
   U.K. and Ireland 02
   Italy 03
   Greece 04
   Yugoslavia 05
   Holland 06
   Germany 07
   New Zealand 08
   Other .. .. ..

7. YEAR OF ARRIVAL

8. SCHOOL ATTENDANCE
   (*If age 15 to 20*)
   Date of leaving school (month and year) month year
   Still attending 1111

9. PERSON TYPE
   Usual resident of P.D. (*Go to Q.11, complete Q.12 to Q.15 when editing*) 1
   Visitor to P.D. 2
   S.D. 3

10. WHAT IS THE POSTCODE OF THE SUBURB OR TOWN WHERE .... USUALLY LIVES?
    A. *If respondent knows postcode, enter in boxes below* 1
    If respondent does not know postcode, ask for:– 2
    Suburb .....
    City/Town .....
    State .....
    When editing, enter postcode in boxes below.
    Not known.. 3
    B. Postcode

11. **I WOULD LIKE TO ASK YOU ABOUT THE WEEK STARTING MONDAY THE ..... AND ENDING LAST SUNDAY THE ..... THAT IS, LAST WEEK**
    (*Go to Q.17*)

12. HOUSEHOLD TYPE
    1 (*Nothing further*) 1
    2 2
    3 3
    4 4
    5 5
    6 (*Complete Q.14*) 6
    7 (*Complete Q.14*) 7
    8 (*Complete Q.14*) 8
    9 (*Nothing further*) 9

13. Husband (*Complete Q.15*) .. 1
    Wife (*Nothing further*).. .. 2
    Son/daughter (*Nothing further*) 3

14. Father/mother 1
    Son/daughter (*Nothing further*) 2

15. *If Household Type 2, 3 or 6 in Q.12, nothing further.*
    If Household Type 4, 5, 7 or 8 in Q.12, enter number of children aged 0 to 14 years

16. OFFICE USE ONLY
    Relationship .. .. A
    Family No... .. .. B
    Children 0-14 years .. C
    UR scope/coverage exclusion D
    Incomplete H/H, L/U .. E
    Schedule, initial response F
    Schedule, final response G
    H

17. LAST WEEK, DID .... DO ANY WORK AT ALL IN A JOB, BUSINESS OR FARM?
- Yes (*Go to Q.19*) .. .. [ ] 1
- No .. .. [ ] 2
- Permanently unable to work (*Go to Q.78*) .. .. .. [ ] 3

18. LAST WEEK, DID .... DO ANY WORK WITHOUT PAY IN A FAMILY BUSINESS?
- Yes .. .. [ ] 1
- No (*Go to Q.38*) .. .. .. [ ] 2

19. DID .... HAVE MORE THAN ONE JOB LAST WEEK?
- Yes (*Go to Q.22*) .. .. [ ] 1
- No .. .. [ ] 2

20. WHAT KIND OF WORK DID .... DO?

.....

.....

.....

[ ][ ][ ]

21. *Go to Q.28*

22. WAS THAT BECAUSE .... CHANGED JOBS DURING THE WEEK?
- Yes .. .. [ ] 1
- No (*Go to Q.25*) .. .. .. [ ] 2

23. WHAT KIND OF WORK DOES .... DO NOW?

.....

.....

.....

[ ][ ][ ]

24. *Go to Q.27*

25. WHAT KIND OF WORK DOES .... DO IN EACH OF .... JOBS?

Job 1: .....

.....

.....

Job 2: .....

.....

.....

26. IN WHICH JOB DOES .... USUALLY WORK THE MOST HOURS?
- Job 1 in Q.25 ○
- Job 2 in Q.25 ○

[ ][ ][ ]

27. I WOULD NOW LIKE TO ASK YOU ABOUT THAT JOB.

28. DID .... WORK –
- FOR AN EMPLOYER FOR WAGES OR SALARY? (*Go to Q.30*) [ ] 1
- IN .... OWN BUSINESS WITH EMPLOYEES?.. .. [ ] 2
- WITH NO EMPLOYEES? .. [ ] 3
- WITHOUT PAY IN A FAMILY BUSINESS? (*Go to Q.30*) .. [ ] 4
- WHAT ARE .... WORKING ARRANGEMENTS?
- Payment in kind (*Go to Q.30*) [ ] 5
- Unpaid voluntary work (*Go to Q.62*) .. .. .. [ ] 6

29A. IS .... BUSINESS A LIMITED LIABILITY COMPANY?
- Yes .. .. [ ] 1
- No .. .. [ ] 2

B. WHAT IS THE FULL NAME AND ADDRESS OF .... BUSINESS?

.....

.....

.....

[ ]

C. *Go to Q.31*

30. WHO DID .... WORK FOR? (Name/Full address)

.....

.....

.....

31. WHAT KIND OF INDUSTRY, BUSINESS, OR SERVICE IS CARRIED OUT AT THAT ADDRESS?

.....

.....

[ ][ ][ ]

32A. ON WHICH DAYS DID .... WORK LAST WEEK (IN ALL JOBS)?

	Yes	No		Yes	No
MON	○	○	SAT	○	○
TUE	○	○	SUN	○	○
WED	○	○			
THU	○	○			
FRI	○	○			

B. DID .... HAVE ANY TIME OFF FROM .... JOB(S) ON THOSE DAYS? ○ ○

C. DID .... WORK ANY PAID OR UNPAID OVERTIME ON ANY DAY LAST WEEK?
- Yes .. .. [ ] 1
- No .. .. [ ] 2
- Other .. .. [ ] 3

D. HOW MANY HOURS DID .... ACTUALLY WORK LAST WEEK (LESS THE TIME OFF) (BUT) (COUNTING THE OVERTIME)?
- 35 hours or more (*Go to Q.78*) .. .. [ ][ ]
- 15-34 hours (*Go to Q.34*) [ ][ ]
- 1-14 hours .. .. .. [ ][ ]
- Less than 1 hour (*Go to Q.51*) [ ] 98
- No hours (*Go to Q.51*).. .. [ ] 99

33. *Sequence Guide*
- *If worked "without pay in a family business" (i.e. code '4' in Q.28), go to Q.62* .. .. [ ] 1
- *Otherwise, go to Q.34* .. [ ] 2

34. IN THAT JOB (THOSE JOBS) DOES .... USUALLY WORK LESS THAN 35 HOURS A WEEK?
- Yes .. .. [ ] 1
- No (*Go to Q.36*) .. .. .. [ ] 2

35. WOULD .... PREFER A JOB IN WHICH .... WORKED MORE HOURS A WEEK?
- Yes (*Go to Q.61*) .. .. [ ] 1
- No (*Go to Q.78*) .. .. [ ] 2
- Don't know (*Go to Q.78*) .. [ ] 3

36. WHY DID .... WORK LESS THAN 35 HOURS LAST WEEK?
- Own illness or injury .. .. [ ] 1
- Leave, holiday or flextime/ personal reasons .. .. .. [ ] 2
- Began job during week .. .. [ ] 3
- Left/lost job during week .. [ ] 4
- On strike/locked out .. .. [ ] 5
- Bad weather/breakdown .. [ ] 6
- Stood down/on short time/ insufficient work.. .. .. [ ] 7
- Shift work/standard work arrangements .. .. .. [ ] 8
- Other .....

.....

..... [ ] 9

37. *Go to Q.78*

38. DID .... HAVE A JOB, BUSINESS, OR FARM THAT .... WAS AWAY FROM BECAUSE OF HOLIDAYS, SICKNESS OR ANY OTHER REASON?
- Yes .. .. [ ] 1
- No (*Go to Q.62*) .. .. .. [ ] 2

39. DID .... HAVE MORE THAN ONE JOB?
- Yes (*Go to Q.42*) .. .. [ ] 1
- No .. .. [ ] 2

40. WHAT KIND OF WORK DOES .... DO?

.....

.....

.....

[ ][ ][ ]

41. *Go to Q.45*

42. WHAT KIND OF WORK DOES .... DO IN EACH OF .... JOBS?

Job 1: .....

.....

.....

Job 2: .....

.....

.....

43. IN WHICH JOB DOES .... USUALLY WORK THE MOST HOURS?
- Job 1 in Q.42 ○
- Job 2 in Q.42 ○

[ ][ ][ ]

44. I WOULD NOW LIKE TO ASK YOU ABOUT THAT JOB.

45. WHO DOES .... WORK FOR? (Name/Full address)

.....

.....

.....

46. WHAT KIND OF INDUSTRY, BUSINESS, OR SERVICE IS CARRIED OUT AT THAT ADDRESS?

.....

.....

.....

[ ][ ][ ]

47. DOES .... WORK –
- FOR AN EMPLOYER FOR WAGES OR SALARY? (*Go to Q.51*) .. [ ] 1
- IN .... OWN BUSINESS WITH EMPLOYEES? .. [ ] 2
- WITH NO EMPLOYEES? .. [ ] 3
- WITHOUT PAY IN A FAMILY BUSINESS (*Go to Q.62*) .. [ ] 4
- WHAT ARE .... WORKING ARRANGEMENTS?
- Payment in kind (*Go to Q.51*) .. .. .. [ ] 5
- Unpaid voluntary work (*Go to Q.62*) .. .. .. [ ] 6

48. IS .... BUSINESS A LIMITED LIABILITY COMPANY?
- Yes (*Go to Q.51*) .. .. [ ] 1
- No .. .. [ ] 2

49. WHY WAS .... AWAY FROM WORK LAST WEEK?
- Own illness or injury .. .. [ ] 1
- Holiday/personal reasons .. [ ] 2
- No work available .. .. [ ] 3
- Bad weather/breakdown .. [ ] 4
- On strike/locked out .. .. [ ] 5
- Other .....

..... [ ] 6

50. *Go to Q.59*

51. WHY WAS .... AWAY FROM WORK LAST WEEK?
- Own illness or injury .. .. [ ] 1
- Leave, holiday or flextime/ personal reasons (*Go to Q.57*) [ ] 2
- Bad weather/breakdown (*Go to Q.57*) .. .. .. [ ] 3
- Stood down (*Go to Q.54*) .. [ ] 4
- No work/insufficient work (*Go to Q.55*) .. .. .. [ ] 5
- On strike/locked out (*Go to Q.59*) .. .. .. [ ] 6
- Usually works less than 1 hr a week/began job/lost job (*Go to Q.62*) .. .. .. [ ] 7
- Other (*Go to Q.57*) .....

.....

..... [ ] 8

52. WAS .... ON WORKERS' COMPENSATION LAST WEEK?
- Yes .. .. [ ] 1
- No (*Go to Q.57*) .. .. .. [ ] 2

53. WILL .... BE RETURNING TO WORK FOR .... EMPLOYER?
- Yes (*Go to Q.59*) .. .. [ ] 1
- No (*Go to Q.62*) .. .. .. [ ] 2
- Don't know (*Go to Q.62*) .. [ ] 3

54. WHY WAS .... STOOD DOWN?
- Bad weather/breakdown (*Go to Q.57*) .. .. .. [ ] 1
- Other.. .. .. [ ] 2

55. WAS .... PAID OR WILL .... BE PAID FOR ANY OF LAST WEEK?
- Yes (*Go to Q.59*).. .. .. [ ] 1
- No .. .. [ ] 2

56. HOW LONG HAS .... BEEN AWAY FROM WORK WITHOUT PAY?
- One week (*Go to Q.59*) .. [ ] 1
- Two weeks (*Go to Q.59*) .. [ ] 2
- Three weeks (*Go to Q.59*) .. [ ] 3
- Four weeks or more (*Go to Q.62*) .. .. .. [ ] 4

57. UP UNTIL THE END OF LAST WEEK, HOW LONG HAD .... BEEN AWAY FROM WORK?
- Less than 4 weeks (*Go to Q.59*) [ ] 1
- 4 weeks or more .. .. .. [ ] 2

58. WAS .... PAID OR WILL .... BE PAID FOR ANY PART OF THE LAST FOUR WEEKS?
- Yes .. .. [ ] 1
- No (*Go to Q.62*) .. .. .. [ ] 2

59. HOW MANY HOURS A WEEK DOES .... USUALLY WORK IN (ALL) .... JOB(S)?
- 35 hours or more (*Go to Q.78*) .. .. .. [ ] 1
- 1 - 34 hours .. .. .. [ ] 2
- No hours (*Go to Q.62*).. .. [ ] 3

60. WOULD .... PREFER A JOB IN WHICH .... WORKED MORE HOURS A WEEK?
- Yes .. .. [ ] 1
- No (*Go to Q.78*) .. .. .. [ ] 2
- Don't know (*Go to Q.78*) .. [ ] 3

61. AT ANY TIME DURING THE LAST 4 WEEKS HAS .... BEEN LOOKING FOR FULL-TIME WORK?
- Yes (*Go to Q.64*).. .. .. [ ] 1
- No (*Go to Q.78*).. .. .. [ ] 2

62. AT ANY TIME DURING THE LAST 4 WEEKS HAS .... BEEN LOOKING FOR FULL-TIME WORK?
- Yes (*Go to Q.64*) .. .. [ ] 1
- No .. .. [ ] 2

63. HAS .... BEEN LOOKING FOR PART-TIME WORK AT ANY TIME DURING THE LAST 4 WEEKS?
- Yes .. .. [ ] 1
- No (*Go to Q.78*) .. .. .. [ ] 2

64. AT ANY TIME IN THE LAST 4 WEEKS HAS ....
- WRITTEN, PHONED OR APPLIED IN PERSON TO AN EMPLOYER FOR WORK? .. [ ] 01
- ANSWERED A NEWSPAPER ADVERTISEMENT FOR A JOB? .. .. [ ] 02
- LOOKED IN NEWSPAPERS?
  - Yes ○
  - No ○
- CHECKED FACTORY OR COMMONWEALTH EMPLOYMENT SERVICE NOTICE BOARDS? .. .. [ ] 03
- AT ANY TIME IN THE LAST 4 WEEKS HAS ....
- BEEN REGISTERED WITH THE COMMONWEALTH EMPLOYMENT SERVICE? .. [ ] 04
- CHECKED OR REGISTERED WITH ANY OTHER EMPLOYMENT AGENCY? .. [ ] 05
- DONE ANYTHING ELSE TO FIND A JOB?
  - Advertised or tendered for work .. .. [ ] 06
  - Contacted friends/relatives [ ] 07
  - Other (*Go to Q.78*)
    .....
    .....
    ..... [ ] 08
- Only looked in newspapers (*Go to Q.78*) .. .. .. [ ] 09
- None of these (*Go to Q.78*) .. .. .. [ ] 10

65. *Sequence Guide*
- *If works and looking for full-time work (i.e. '1' in Q.61), go to Q.78* .. .. [ ] 1
- *Otherwise, go to Q.66* .. [ ] 2

66. IF .... HAD FOUND A (PART-TIME) JOB COULD .... HAVE STARTED WORK LAST WEEK?
- Yes (*Go to Q.71*) .. .. .. [ ] 1
- No .. .. [ ] 2
- Don't know (*Go to Q.71*) .. [ ] 3

67. WHAT WERE THE REASONS .... COULD NOT HAVE STARTED WORK LAST WEEK?
- Own illness or injury .. .. [ ] 1
- Going to school (*Go to Q.78*) .. .. .. [ ] 2
- Going to a tertiary institution (*Go to Q.78*) .. .. [ ] 3
- Personal reasons, family responsibilities (*Go to Q.78*) .. .. .. [ ] 4
- Waiting to start job (*Go to Q.69*) .. .. [ ] 5
- Other (*Go to Q.78*)
  ..... [ ] 6

68. UP UNTIL THE END OF LAST WEEK HOW LONG HAD .... BEEN ILL?
- Less than 4 weeks (*Go to Q.71*) [ ] 1
- 4 weeks or more (*Go to Q.78*) .. .. .. [ ] 2

69. WHEN WILL .... BE STARTING WORK IN THAT JOB?
- Less than 4 weeks .. .. [ ] 1
- 4 weeks or more (*Go to Q.78*) .. .. .. [ ] 2

70. IF THE JOB HAD BEEN AVAILABLE LAST WEEK, WOULD .... HAVE STARTED THEN?
- Yes .. .. [ ] 1
- No (*Go to Q.78*) .. [ ] 2

71. WHEN DID .... BEGIN LOOKING FOR WORK?
.....
- Less than 2 weeks .. .. [ ] 001
- No. of weeks .. [ ][ ][ ]

72. HOW LONG AGO IS IT SINCE .... LAST WORKED FULL-TIME FOR TWO WEEKS OR MORE?
.....
- Under 2 years (no. of weeks) [ ][ ][ ]
- 2 years or more (*Go to Q.78*) .. [ ] 104
- Never worked (*Go to Q.78*) .. [ ] 999

73. WHAT KIND OF WORK DID .... DO?
.....
.....
.....
.....
[ ][ ][ ]

74. WHO DID .... WORK FOR? (Name/Full address)
.....
.....
.....

75. WHAT KIND OF INDUSTRY, BUSINESS OR SERVICE WAS CARRIED OUT AT THAT ADDRESS?
.....
.....
.....
[ ][ ][ ]

76. DID .... WORK –
- FOR AN EMPLOYER FOR WAGES OR SALARY? (*Go to Q.78*) .. [ ] 1
- IN OWN BUSINESS – WITH EMPLOYEES? .. .. [ ] 2
- WITH NO EMPLOYEES? .. [ ] 3
- WITHOUT PAY IN A FAMILY BUSINESS? (*Go to Q.78*) .. [ ] 4
- WHAT WERE .... WORKING ARRANGEMENTS?
- Payment in kind (*Go to Q.78*) .. .. .. [ ] 5
- Unpaid voluntary work (*Go to Q.78*) .. .. .. [ ] 6

77. WAS .... BUSINESS A LIMITED LIABILITY COMPANY?
- Yes (*Go to Q.78*) .. .. [ ] 1
- No (*Go to Q.78*) .. .. [ ] 2

78. *Sequence Guide*
- *If still attending school ('1111' in Q.8), go to Q.79* .. .. [ ] 1
- *If left school in 1983 or 1984 (Q.8), go to Q.80* .. .. [ ] 2
- *If aged 15-25 years, go to Q.82* .. .. .. [ ] 3
- *If aged 26-64 years, go to Q.83* .. .. .. [ ] 4
- *Otherwise, go to Q.102* .. [ ] 5

79. IS ..... ATTENDING A GOVERNMENT OR STATE SCHOOL, ROMAN CATHOLIC SCHOOL, OR SOME OTHER TYPE OF NON-GOVERNMENT SCHOOL?
- Government/State (*Go to Q.105*) .. .. .. [ ] 1
- Roman Catholic (*Go to Q.105*) .. .. .. [ ] 2
- Other (*Go to Q.105*) .. .. [ ] 3

80. WAS THE LAST SCHOOL ..... ATTENDED A GOVERNMENT OR STATE SCHOOL, ROMAN CATHOLIC SCHOOL, OR SOME OTHER TYPE OF NON-GOVERNMENT SCHOOL?
- Government/State .. .. [ ] 1
- Roman Catholic .. .. [ ] 2
- Other .. .. [ ] 3

81. LAST YEAR DID ..... ATTEND SCHOOL FULL-TIME OR PART-TIME?
- Full-time (*Go to Q.87*) .. [ ] 1
- Part-time (*Go to Q.87*) .. [ ] 2

82. WAS THE LAST SCHOOL ..... ATTENDED A GOVERNMENT OR STATE SCHOOL, ROMAN CATHOLIC SCHOOL, OR SOME OTHER TYPE OF NON-GOVERNMENT SCHOOL?
- Government/State .. .. [ ] 1
- Roman Catholic .. .. [ ] 2
- Other .. .. [ ] 3

83. AT ANY TIME IN 1983 DID ..... DO ANY COURSE OF STUDY AT A SCHOOL OR ANY OTHER EDUCATIONAL INSTITUTION?
- Yes .. .. [ ] 1
- No (*Go to Q.87*) .. .. [ ] 2

84. DID ..... DO THIS COURSE FULL-TIME OR PART-TIME?
- Full-time .. .. [ ] 1
- Part-time .. .. [ ] 2

85. WHAT KIND OF EDUCATIONAL INSTITUTION WAS ..... ENROLLED AT IN 1983?
- Primary or secondary school .. [ ] 1
- University or university college [ ] 2
- Other (*Name/address*)
  .....
  .....
  .....
  .....
- *Office Use Only*
  - *CAE* [ ] 3
  - *Tech Coll/TAFE* [ ] 4
  - *Other* [ ] 5

86. *Interviewer: Show blue prompt card 1.*

WHICH OF THESE GROUPS BEST DESCRIBES THE TYPE OF COURSE ..... WAS DOING LAST YEAR?
- Code 1 — Bachelor degree or higher .. [ ] 1
- Code 2 — Diploma/Certificate/Apprenticeship .. .. .. [ ] 2
- Code 3 — Secondary school course .. [ ] 3
- Code 4 — Adult education, etc. .. .. [ ] 4

87. IS ..... CURRENTLY TAKING ANY COURSE OF STUDY AT ALL?
- Yes .. .. [ ] 1
- No (*Go to Q.91*) .. .. [ ] 2

88. IS ..... DOING THIS COURSE FULL-TIME OR PART-TIME?
- Full-time .. .. [ ] 1
- Part-time .. .. [ ] 2

89. AT WHAT KIND OF EDUCATIONAL INSTITUTION IS ..... NOW ENROLLED?
- Primary or secondary school .. [ ] 1
- University or university college [ ] 2
- Other (*Name/address*)
  .....
  .....
  .....
  .....
- *Office Use Only*
  - *CAE* [ ] 3
  - *Tech Coll/TAFE* [ ] 4
  - *Other* [ ] 5

90. *Interviewer: Show blue prompt card 1.*

WHICH OF THESE GROUPS BEST DESCRIBES THE TYPE OF COURSE ..... IS DOING?
- Code 1 — Bachelor degree or higher .. [ ] 1
- Code 2 — Diploma/Certificate/Apprenticeship .. .. .. [ ] 2
- Code 3 — Secondary school course .. [ ] 3
- Code 4 — Adult education, etc. .. .. [ ] 4

91. *Sequence Guide*
- *If full-time student now ('1' in Q.88), go to Q.97* .. [ ] 1
- *If code '1' in Q.81, go to Q.93* [ ] 2
- *If was full-time student in 1983 ('1' in Q.84), go to Q.95* [ ] 3
- *If aged 15-25 years, go to Q.92* .. .. .. [ ] 4
- *Otherwise, go to Q.97* .. [ ] 5

92. IN WHAT YEAR DID ..... END FULL-TIME STUDY?
Year 19 [ ][ ]

93. HOW OLD WAS ..... WHEN ..... ENDED FULL-TIME STUDY?
Years old [ ][ ]

94. *Go to Q.97*

95. WHEN DID ..... END FULL-TIME STUDIES AT *(Institution in Q.85)*?

- Left Jan-May 1983 1
- Left June 1983 2
- Left July 1983 3
- Left Aug-Oct 1983 4
- Left November 1983 5
- Left December 1983 6
- Left Jan-May 1984 7

96. HOW OLD WAS ..... WHEN ..... ENDED FULL-TIME STUDIES AT *(Institution in Q.85)*?

Years old [ ][ ]

97. *Sequence Guide*

- *If aged 35 years or more, go to Q.102* 1
- *If occupation description includes "apprentice" (Q.20, 23, 25, 40 or 42), go to Q.100A* 2
- *If has a job now (Q.28 or Q.47 answered), go to Q.98* 3
- *Otherwise, go to Q.102* . . 4

98. HAS ..... EVER DONE A TRADE APPRENTICESHIP?

- Yes 1
- No *(Go to Q.102)* 2

99. IS ..... CURRENTLY AN APPRENTICE, OR PROBATIONARY OR TRAINEE APPRENTICE?

- Yes *(Go to Q.100B)* 1
- No *(Go to Q.102)* 2

100A. YOU SAID ..... IS CURRENTLY AN APPRENTICE — IS ..... A FIRST, SECOND, THIRD, FOURTH OR FIFTH YEAR APPRENTICE?

100B. IS ..... A FIRST, SECOND, THIRD, FOURTH OR FIFTH YEAR APPRENTICE?

- First 1
- Second 2
- Third 3
- Fourth 4
- Fifth 5

101. *Office Use Only*

Sector Code [ ]

102. *Sequence Guide*

- *If married female with husband in on scope and coverage, go to Q.105* . . 1
- *If married and spouse listed on HF, go to Q.103A* . . 2
- *Otherwise, go to Q.103B* . . 3

103A. THE NEXT QUESTION IS ABOUT THE COMBINED WEEKLY INCOME OF ..... AND *(Name of spouse)*.

Show YELLOW Prompt Card 2

IN WHICH OF THESE GROUPS IS (THEIR/YOUR) COMBINED TOTAL WEEKLY INCOME FROM ALL SOURCES BEFORE TAX OR ANYTHING ELSE IS TAKEN OUT?

103B. *Show YELLOW Prompt Card 2*

IN WHICH OF THESE GROUPS IS ..... TOTAL WEEKLY INCOME FROM ALL SOURCES BEFORE TAX OR ANYTHING ELSE IS TAKEN OUT?

Group [ ][ ]

Don't know 99

104. CURRENTLY, WHAT IS ..... (AND ..... HUSBAND'S/WIFE'S) MAIN SOURCE OF INCOME?

- Wage/salary 1
- Own business 2
- Government Cash Benefits . . 3
- Superannuation. 4
- Interest/investment 5
- Other 6

105. *Sequence Guide*

- *If wage or salary earner ('1' in Q.28 or Q.47) or limited liability company ('1' in Q.29A or Q.48), go to Q.106* 1
- *Otherwise, no more questions* 2

106. *Sequence Guide*

- *If aged 25 years or more go to Q.107* 1
- *Otherwise, go to Q.109* . . 2

107. HAS ..... TAKEN ANY LONG SERVICE LEAVE SINCE THE BEGINNING OF MAY 1983?

- Yes 1
- No *(Go to Q.109)* 2
- Don't know *(Go to Q.109)* . . 3

108A. IN WHICH MONTHS DID ..... TAKE LONG SERVICE LEAVE?

(Tick circles then ask Q.108B)

108B. HOW MANY WEEKS LONG SERVICE LEAVE DID ..... TAKE IN *(month)*?

Month			Weeks
May 1983	○	*(c)*	[ ]
June 1983	○	*(d)*	[ ]
July 1983	○	*(e)*	[ ]
Aug. 1983	○	*(f)*	[ ]
Sept. 1983	○	*(g)*	[ ]
Oct. 1983	○	*(h)*	[ ]
Nov. 1983	○	*(i)*	[ ]
Dec. 1983	○	*(j)*	[ ]
Jan. 1984	○	*(k)*	[ ]
Feb. 1984	○	*(l)*	[ ]
March 1984	○	*(m)*	[ ]
April 1984	○	*(n)*	[ ]
May 1984	○	*(p)*	[ ]

109. HAS ..... TAKEN ANY PAID ANNUAL LEAVE OR ANNUAL HOLIDAYS SINCE THE BEGINNING OF MAY 1983?

- Yes 1
- No *(Go to Q.111)* 2
- Don't know *(Go to Q.111)* . . 3

110A. IN WHICH MONTHS DID ..... TAKE PAID ANNUAL LEAVE OR ANNUAL HOLIDAYS?

(Tick circles then ask Q.110B)

110B. HOW MANY WEEKS ANNUAL LEAVE DID ..... TAKE IN *(month)*?

Month			Weeks
May 1983	○	*(c)*	[ ]
June 1983	○	*(d)*	[ ]
July 1983	○	*(e)*	[ ]
Aug. 1983	○	*(f)*	[ ]
Sept. 1983	○	*(g)*	[ ]
Oct. 1983	○	*(h)*	[ ]
Nov. 1983	○	*(i)*	[ ]
Dec. 1983	○	*(j)*	[ ]
Jan. 1984	○	*(k)*	[ ]
Feb. 1984	○	*(l)*	[ ]
March 1984	○	*(m)*	[ ]
April 1984	○	*(n)*	[ ]
May 1984	○	*(p)*	[ ]

Go to Q.111

Q.111

111. *Sequence Guide*

- *If leave taken in Both Dec. and Jan. ENTER TOTAL weeks, go to Q.112* . . [ ][ ]
- *Otherwise, go to Q.113* . . 99

112. IN DECEMBER AND JANUARY ..... TOOK *(weeks in Q.111)* WEEKS OF (LONG SERVICE) (AND) (ANNUAL) LEAVE. WAS ALL THIS LEAVE TAKEN AT THE ONE TIME?

- Yes 1
- No 2

113. *Sequence Guide*

. *If interviewing in a block excluded from the health insurance topic, no more questions* . . . . . ☐ 1

. *Otherwise, go to Q.114* . . ☐ 2

114. *Sequence Guide*

. *If still attending school, ('1111' in Q.8), no more questions* . . . . . ☐ 1

. *If SD or Vis to PD, no more questions* . . . . ☐ 2

. *If married female and husband IN on scope and coverage, no more questions* ☐ 3

. *If married, go to Q.116* . . ☐ 4

. *If aged 15-25 and taking a course of full-time study, ('1' in Q.88), go to Q.115* . . ☐ 5

. *Otherwise, go to Q.116* . . ☐ 6

115. *Sequence Guide*

. *If person has child/children go to Q.116* . . . . . ☐ 1

. *Otherwise, no more questions* ☐ 2

116. THE NEXT FEW QUESTIONS ARE ABOUT ..... PRIVATE HEALTH INSURANCE ARRANGEMENTS. YOU SHOULD NOT INCLUDE BENEFITS PROVIDED BY MEDICARE IN YOUR ANSWERS TO THE FOLLOWING QUESTIONS.

117. DOES ..... CURRENTLY HAVE PRIVATE HEALTH INSURANCE?

Yes . . . . . ☐ 1

No *(Go to Q.125)* . . ☐ 2

118. IS THIS INSURANCE AT SINGLE OR FAMILY RATES?

Single . . . . . ☐ 1

Family . . . . . ☐ 2

Other arrangements . . . . ☐ 3

119. DOES ..... PRIVATE INSURANCE COVER ..... FOR HOSPITAL EXPENSES?

Yes . . . . . ☐ 1

No *(Go to Q.121)* . . . . ☐ 2

120. IS THIS INSURANCE AT THE BASIC LEVEL OF THE PRIVATE HEALTH FUND OR IS ..... INSURED AT A HIGHER LEVEL OF HOSPITAL COVER?

Basic Cover . . . . . ☐ 1

Higher cover . . . . . ☐ 2

Don't know . . . . . ☐ 3

Other . . . . . ☐ 4

121. IS ..... INSURED FOR EXPENSES SUCH AS DENTAL, PHYSIOTHERAPY OR GLASSES?

Yes . . . . . ☐ 1

No . . . . . ☐ 2

Don't know . . . . . ☐ 3

122. *Sequence Guide*

. *If 'don't know' in Q.120 OR Q.121, go to Q.123* . . . . ☐ 1

. *Otherwise, go to Q.125* . . ☐ 2

123. DO YOU HAVE THE MEMBERSHIP BOOK SO THAT I CAN RECORD THE NAME OF THE TABLE ..... IS COVERED BY?

Book produced *(Go to Q.124)* ☐ 1

Book not available. *(Go to Q.125)* . . . . . ☐ 2

124. *Interviewer:*

COMPANY .....

.....

TABLE .....

.....

Enter code during editing ☐☐

125. *Interviewer:*

Code number of children 15-25 years at full-time education

None . . . . . ☐ 9

Number aged 15-25 . . . . ☐

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